

CITY OF SURPRISE WINTER 2017 ADULT SPORTS COMMUNITY & RECREATION SERVICES



TEAM REGISTRATION ONLY

REGISTRATION DATES: December 5 - December 9, 2016

FOR MORE INFORMATION:

Call 623.222.2000 or visit www.surpriseaz.gov/recreation

Submit Registrations by Mail or Walk-in to: City of Surprise Community & Recreation Services 15960 N. Bullard Ave Surprise, AZ 85374 (Monday-Friday 8am-5pm) Main: 623.222.2000 ***All participants must be 18 years of age or older ***

SEASON BEGINS: January 3, REGISTRATION FEE: \$400. LEAGUE PLAY: 5 on 5 (Maxi	2017 - 8 game regular 00 per team (fee due a	season with a single elimi at time of registration)	nation tournament	
COED KICKBALL LEASEASON BEGINS: January 7, REGISTRATION FEE: \$200.1 LEAGUE PLAY: 10 in the field	2017 - 10 game regula 00 per team (fee due a	ar season with a single elimat time of registration)	nination tournament	×
4 ON 4 FLAG FOOTBAI SEASON BEGINS: December REGISTRATION FEE: \$300. LEAGUE PLAY: 4 on 4 (Maxi	18, 2016 - 12 game do 00 per team (fee due a	ouble-headers with a double at time of registration)	e elimination tourname	ent P
CO-ED INDOORVOLEY SEASON BEGINS: January 8, REGISTRATION FEE: \$200.0 LEAGUE PLAY: 6 on 6 (Maxi	2017 - 8 game regular 00 per team (fee due a	season with a single elimi at time of registration)	nation tournament	Valley-Ball
TEAM NAME:				
MANAGER'S NAME Last:				
ADDRESS:				
PHONE (Main):	(Alternate):	EMAIL:		
ASST. MANAGER'S NAME Last	:	First:		
PHONE (Main):	(Alternate):	EMAIL:		=
As Team Manager, I verify that all names, addresses an Services Department and will be responsible for any da or her own health insurance coverage. The City of Surrillness or damage to personal property during the course harmless the foregoing from any losses or damages, inc	mages and cleanup necessary. I under orise, the directors, supervisors, instruc- e of this program except that resulting	estand each participant involved in sporting e etors of the City of Surprise and its officials at from gross negligence and or intentional cond	vents, plays at his or her own risk and i re hereby released and discharged from duct thereof. I hereby covenant to inde	s responsible for his any suit of injury, mnify and hold
I understand these programs are non-refun participant) to take pictures for use in television magazine articles, booklets, posters and in oth	n, film, radio, print or social media			
Manager's Signature		Date _		
STAFF USE ONLY: Cash Amount:	Check #/Amt	Date	Staff Initials	

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leam Name:	Name																
	Phone																
Manager's Name:	Address																
	City, State, Zip																

Players must be listed on this roster to participate at any time. Change forms may be picked up/turned in to the site supervisor at the field or turned into the Community & Recreation Services Office.

incurred in the event of any such claims asserted against them or any of them. I certify that all players listed on this roster have read and agree to this waiver. The City of Surprise, the directors, supervisors, instructors of the City of Surprise and its officials are hereby released and discharged from any suit of injury, thereof. I hereby covenant to indemnify and hold hamless the foregoing from any losses of damages, including reasonable attorney fees, which may be illness or damage to personal property during the course of this program except that resulting from gross negligence and or intentional conduct

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Manager's Signature: